## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>09-15-2010</u>	Address:	BURNAM ST & MOTT ST.
Case #:	22F46346		KENDALLVILLE, IN
County:	NOBLE		<u>46755</u>
Type of Laboratory Seizure (check one)  Operational Lab Chemical/Glassware/Equipment (only)		Scizure Location (c	☐ Hotel/Motel ☑ Open – No Structure
	te (only)	☐ Vehicle	Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)			
☑ Lithium/Ammonia Reaction(s): <u>OPEN</u>			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents: OPEN			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
☐ Hydrochloric Acid Gas Generator(s): <u>OPEN</u>			
Corrosive Acid: OPEN			
Corrosive Base: OPEN			
Other (item and location):			
☐ Yes _ ⊠ No	er age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrin	e Information e/Pseudoephedrine Tracking Log erchant Tip
This report is to be faxed to the following agencies that serve the location:			
Health Dep	ment: KENDALLVILLE FD artment: NOBLE CO ction Service:	Fax: <u>E-MA</u> Fax: <u>E-MA</u> Fax:	JLED .
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>ANDREW SMITH</u> Phone <u>260-432-8661</u>			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

<sup>\*\*\*</sup> This form is to be included with the case file, and a copy sent to the Clandostine Laboratory Team Leader for retention.